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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/792,178			ing Date 03/2004	☐ To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR			NUMBER FI	LED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		ı	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A		N/A		ı	N/A	
EXAMINATION FEE (37 CFR 1,16(o), (p), or (q))			N/A		N/A		N/A		ı	N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			mir	nus 20 = *		1	X \$ = 1		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 = *			ı	x \$ =		1	X S =	
□APPLICATION SIZE FEE (37 CFR 1.18(e)) If the specification and draw sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and					n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						1					
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	L
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	12/07/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 9	Minus	** 61	= 0]	X \$ =		OR	X \$60=	0
	Independent (37 CFR 1.16(h))	• 1	Minus	***4	= 0	ı	X \$ =		OR	X \$250=	0
	Application Size Fee (37 CFR 1.16(s))								_		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					П			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus		=		X \$ =		OR	x s =	
№	Independent (37 CFR 1 16(h))	*	Minus	***	-	l	x s =		OR	x s =	
NEN.	Application Size Fee (37 CFR 1.16(s))					ı			l		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
								·	OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write 0" in column 3. *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20". **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. The Thighest Number Previously Paid For (Total or independent) is the highest number found in the appropriate box in column 1. The Thighest Number Previously Paid For (Total or independent) is the highest number found in the appropriate box in column 1.											

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